‘I don’t feel human’

Experiences of destitution among young refugees and migrants
Acknowledgements

This report was written by Ilona Pinter.

It is based on a review of existing literature, a consultation carried out with practitioners from The Children’s Society’s programmes across England and other partner organisations. Crucially it was informed by a series of case studies of the young people and families supported by our projects.

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All the families and young people we interviewed shared with us their incredibly difficult but inspiring stories with the hope of helping to raise awareness of these important issues among the wider public. We know that many of their friends and others like them are still suffering in destitution and we hope this contribution will lead to lasting change in policy and practice to protect these young people.

All children’s names have been changed for the purposes of this report.

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Introduction

The Children’s Society started its work with young refugees in 1997 when many young people seeking asylum came to our services having experienced severe mental health difficulties and homelessness. Today we work with almost 2,000 young refugees and migrants each year through 10 specialist centres across England as well as through children’s centres and other mainstream services. We are now witnessing an alarming rise in the number of destitute children, young people and families accessing our services in desperate need of support. Many of these children and young people are having to put themselves at great risk because they have nowhere to live and no support. As a result, some have been subjected to abuse and exploitation.

This report looks at the available data on the extent and impact of destitution and, based on findings from our services, sets out the devastating impact it has on children, young people and families. Having fled danger in their country of birth, they have to expose themselves to potential danger and harm in this country because they are excluded from support and adequate accommodation. They remain hidden from view and have to survive with minimal resources.

Alarmingly their predicament is not an unintended consequence. Forced destitution has been a deliberate policy, introduced by the previous government to try and reduce what were seen to be ‘incentives’ for those coming to the UK to claim asylum. In its 2007 report, the parliamentary Joint Committee on Human Rights noted that:

‘We have been persuaded by the evidence that the government has indeed been practicing a deliberate policy of destitution of this highly vulnerable group [asylum seekers]. We believe that all deliberate use of inhumane treatment is unacceptable. We have seen instances in all cases where the government’s treatment of asylum seekers and refused asylum seekers falls below the requirements of the common law of humanity and international human rights law.’

Despite this criticism, the current government continues to withdraw and withhold support to refused asylum seekers as a way to expedite their return to their country of origin. This leaves many thousands of people, including children and young people, who cannot return to their country of origin, destitute for prolonged periods of time, sometimes several years, and without access to even the most basic welfare support. This particularly affects young children in the crucial early years of their life and damages the life chances of older children as they transition into adulthood.

The experiences of destitute children and young people raise serious welfare concerns. Indeed, their acute vulnerability means that their predicament should be seen as an important child protection concern. In future they must be properly protected. This report ends by setting out what needs to change to achieve that.

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Chapter 1: The background

The government’s definition of destitution is set out in the Immigration and Asylum Act 1999 and the Nationality, Immigration and Asylum Act 2002. In the latter, the definition states that a person and his dependants are destitute:

‘if they do not have and cannot obtain both (a) adequate accommodation, and (b) food and other essential items’

Other organisations working on refugee and asylum issues have defined destitution more broadly. For example, the Information Centre about Asylum and Refugees describes destitution as the:

‘inability to access statutory support mechanisms… reliance on friends, family and charitable groups for basic subsistence and/or accommodation. It can also be defined by its symptoms or effects, such as homelessness.’

For the purposes of this report destitution is defined as the lack of regular access to essential resources such as food, clothing, toiletries, medicine and a place to live. However, we have gone on to consider the impact of destitution on various aspects of a child’s life and how they relate to duties to promote children’s best interests and provide child protection. We have also taken into account the consequences of destitution on children’s rights as defined by the UN Convention on the Rights of the Child (UNCRC) including their safety, well-being, health, education, developmental needs and future prospects.

The current arrangements for financial support

Immigration policies over the last decade have significantly increased the risks of poverty for some immigrant categories, most notably those who claim asylum and those who are living in the UK with no legal status. Children and families who are subject to immigration control have no recourse to public funds, which means that they are unable to access mainstream benefits. Asylum seekers and those who do not have a regular immigration status are not allowed to work. Some help and accommodation is available from the UK Border Agency (UKBA) for asylum seekers through asylum support for children in need from local authorities. However, the limited provision and strict conditions mean that many children, young people and families are not accessing these services.
Asylum support for families with children – ‘Section 95’

The majority of people who claim asylum are destitute when they arrive in the UK. They are not permitted to work but they can access Section 95 support under the Immigration and Asylum Act 1999 once they have submitted their asylum claim. This support comes in the form of accommodation and/or cash support.

Families remain entitled to this help until they are granted refugee status, when they become eligible for mainstream benefits and are allowed to work, or, if they are refused asylum, until they leave voluntarily or are forcibly removed from the UK. Single adults or couples without children, on the other hand, have this support removed when their claim is refused and they have exhausted all their appeal rights. But if these adults have children after this point, these new families, including lone mothers with very young children, are then left homeless and destitute. While adults without children may be able to rely on friends for a place to stay, the arrival of a child often makes these types of arrangements far more difficult.

Subsistence under Section 95 is much lower than income support levels for UK citizens. For example, a lone mother with one child receives £96.90 per week under Section 95 support, which is equivalent to two thirds of income support. Families are provided with accommodation and are dispersed outside of London and the South East to a low-demand housing area, on a no-choice basis.

Asylum support for refused asylum seekers – ‘Section 4’

Some families may be able to access Section 4 ‘hard case’ support under the Immigration and Asylum Act 1999, which is meant to provide short-term voucher-based support to adults who are destitute, if they meet specific strict requirements. Examples would include if they are taking all reasonable steps to leave the UK, if there is no viable route of return or if there is a physical or medical reason why they cannot travel.

A payment card is provided and a small amount of money – in some cases equivalent to less than half the value of income support – is placed on it each week to be spent in designated supermarkets. However, for most families accessing this support means being forced to start making arrangements to return to their country of origin where they may still fear for their and their children’s safety and so many choose not to apply at all.
Local authority support

Under the Children Act 1989, local authorities have a general duty to support children in need in their area. Children that seek asylum in the UK alone are normally looked after by local authorities under Section 20 of the legislation. When they leave care, they are entitled to the same leaving care provisions as any other looked after child.7

In addition, social services have the power to provide accommodation and other assistance to a family of a child in need if it is considered to be required to safeguard or promote the child’s welfare.8 Some families, who are subject to immigration control, have no recourse to public funds and do not qualify for asylum support, can be provided with support from local authorities under these provisions. This is particularly the case for migrant children from EU and non-EU countries whose families are not seeking asylum in the UK but who for various reasons cannot leave the UK.

However, local authority support can be withheld or withdrawn from certain groups of migrants and refused asylum seekers – ‘ineligible persons’ – under the Nationality, Immigration and Asylum Act 2002. This means that vital support including welfare, accommodation and leaving care support can be withheld from children, young people and families.9 Although support should not be withdrawn from children under 18 or British citizens,10 and should not be withheld or withdrawn if it would breach an individual’s human rights, this is not always the case in practice. In addition, some local authorities are only prepared to provide support to children who are destitute, not their parents. Therefore parents seeking support from local authorities are often turned away or threatened that their children will be taken into care.

Furthermore, under this legislation, local authorities must inform the Home Office11 when they consider someone to be an ‘ineligible person’ for support under the Schedule 3 provision. As a result many vulnerable young people and families who fear being removed will not access any support.

What duties exist to promote the welfare of children?

There is an ongoing tension between children’s rights and safeguarding policies, and policies for immigration control. Policies that limit access to support and services for those subject to immigration control inevitably have the greatest affect on those who have no alternatives and act in opposition to statutory duties to promote the well-being and best interests of children.

Children’s rights

According to international legislation, the best interests of the child should be a primary consideration in all actions concerning them.12 In addition children have rights to family unity, play, education, the highest attainable standards of health, a right against child labour and exploitation, prohibition of harm and the provision of psychological rehabilitation and reintegration.13 Children’s rights apply to all children within the state’s jurisdiction without discrimination of any kind including national, ethnic or social origin or other status.14 The UN Committee on the Rights of the Child (UNCRC) has consistently criticised the UK for its treatment of certain groups of children, including migrant, asylum-seeking and refugee children, who continue to experience discrimination and social stigmatisation.15 The government has made some progress on this front, for example by lifting its immigration reservation to the UNCRC in 2008, which means that any decision or policy now made by a public authority affecting children who are subject to immigration control has to be made in accordance with the UNCRC to the same extent as those concerning any other child resident in the UK. However, as this report demonstrates, children’s rights continue to be breached for purposes of immigration control.
Children’s views
An important part of ensuring that children’s best interests are met is ensuring that children’s views are considered in decisions that affect them and that these views are given due weight in accordance with their age and maturity. This is particularly important for children within the immigration system who are often invisible to decision-makers, as demonstrated in the recent landmark case ZH Tanzania. In her judgement Lady Hale noted that:

‘while their interests may be the same as their parents’ this should not be taken for granted in every case [and] immigration authorities must be prepared at least to consider hearing directly from a child who wishes to express a view and is old enough to do so.’

Child Poverty Act 2010
In addition, the Child Poverty Act 2010 puts into legislation the government’s commitment to eradicating child poverty by setting UK-wide targets for central and local government, and their partners. The government is required to produce child poverty strategies that run through to 2020 to set out what action is needed, reporting annually to parliament on its progress. However, so far the experiences of refugee and migrant children have been absent from the child poverty debate.

Promoting welfare and ensuring best interests
Under domestic legislation, local authorities have a duty to safeguard and promote the welfare of children in their area and must do so by working in partnership with other organisations as well as children and their carers. The UK Border Agency has a similar duty under Section 55 of the Borders, Citizenship and Immigration Act 2009. According to government guidance, this means putting in place processes for:

‘preventing impairment of children’s health or development; ensuring that children are growing up in circumstances consistent with the provision of safe and effective care; and undertaking that role so as to enable those children to have optimum life chances and to enter adulthood successfully.’

Local authorities and other agencies must also cooperate to improve the well-being of children in relation to their physical and mental health and emotional well-being; protection from harm and neglect; education, training and recreation; the contribution they make to society; and their social and economic well-being. Other legalisation determines the duties of statutory agencies to provide key services to children in their area such as education, health care and housing.

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Chapter 2: What do we know about the extent of destitution among children, young people and families?

This report was prompted by a noticeable increase in the number of destitute young people accessing our services. While The Children’s Society does not operate services for asylum seeking and migrant children in every region of the UK, our work in London, the Midlands and the North has revealed widespread incidence of destitution and it is clear that this is not limited to these areas alone.

There is currently no central mechanism for collecting or monitoring the extent of destitution among refugee and migrant children and young people. In a recent Parliamentary Question, the Immigration Minister explained that:

‘no asylum seeker need be destitute while their claim is being determined... therefore, we do not measure the incidence of destitution among the asylum seeker community.’

Therefore, most of the available data rely on estimates derived from various data sources and local tallies by support agencies providing crisis support, such as the Asylum Support Partnership.

In addition, most of the available information on destitution from civil society organisations relates to refused asylum seeking adults, with very little data specific to children and young people. There is even less information about other migrant groups who have no recourse to public funds.

What can be determined from official data?

The only data currently collected by local and central government indicating the prevalence of destitution relate to the number of children, young people and families supported by the UKBA with asylum support and by local authorities for those who have no recourse to public funds. This only provides an indication of the number of children and young people who would otherwise be destitute and is not an accurate reflection of the true extent of destitution as many young people and families with no recourse to public funds are deemed ineligible for support or do not seek to access it for fear of being forcibly removed from the UK.

Numbers of those accessing very limited asylum support

As noted in the previous chapter, some refused asylum seeking families where children are born after the claim has been refused, are accessing very limited support under Section 4, meaning that some of the very youngest children are at risk of destitution. According to information provided by the Home Office through a Freedom of Information Act request, of the 3,715 refused asylum seekers (including dependents) in receipt of Section 4 support on 3 April 2011, 21% or 765 were children and the overwhelming majority of these (86% or 656) were very young children under five years old.
Numbers of those accessing support from local authorities

The No Recourse to Public Funds Network conducted a survey of local authorities in an attempt to measure the number of individuals including children and young people supported by local authorities. It showed that 1,729 families and 606 care leavers with no recourse to public funds were supported by local authorities in 2009/10.

According to data provided to The Children’s Society by the Department for Education we know that over 2,000 unaccompanied asylum seeking children leave care every year, of whom only 5% are said to be returned home to live with parents or relatives. Some are moved into independent living with supported accommodation (26%) while others receive no formalised support (17%). The overwhelming majority – 51% or over 1,000 young people each year – cease to be looked-after for ‘other reasons’ and there is little information on what these ‘other reasons’ might be. What is clear is that the provision of support for these young people and the monitoring of their situation is extremely limited.

Length of destitution

Although the lack of central data on destitution means there are no definitive statistics for this, Home Office data on the length of time children and families are supported on Section 4 indicate that families with very young children are living on minimum levels of support and in inappropriate accommodation for prolonged periods of time. Forty per cent of those in receipt of Section 4 support in April 2011 had been living in these conditions for over two years and 12% of cases had been on this support for four to six years. The Second Destitution Tally similarly found that refused asylum seekers with children experienced long periods of destitution with a third being destitute for over six months. According to the Child Poverty Act 2010, persistent poverty relates to children living in poverty for three years or more.

What we don’t know

The information above does not tell us how many children and young people are experiencing destitution due to immigration policy: how many have tried to access support but have been refused because of their immigration status; how many have had their support withdrawn because of a change in their immigration status or how many have gone missing and are too afraid to access any support for fear of being forcibly removed.

Estimates derived from population data

In order to gauge how many children living in the UK are at risk of destitution due to immigration restrictions, it is useful to consider the size of the irregular migrant population of children living in the UK. According to estimates by researchers at the University of Oxford, we know that there were 155,000 irregular or undocumented migrant children living in the UK at the end of 2007. The majority of these – 85,000 – were children born in the UK while 70,000 children were born abroad but came to the UK alone or as dependents. ‘Irregular migrants’ typically refers to the migrants in a country who do not have a legal basis to reside, either because they have overstayed on a time-limited permit or because they have entered the country by evading immigration controls.

However, defining children as irregular migrants is problematic since in most cases they will have no control over their immigration status or an understanding of its implications. For example, some irregular migrant children who are born in the UK may have parents who came to the UK to seek asylum, were refused but have been unable to return to their parent’s country of origin because they fear for their safety. Of those children who were born abroad, some may have been sent here on a visa but their immigration status has never been regularised. Others have been brought into the country as victims of human trafficking and so were forced to enter the country by evading immigration controls or on false papers.
The experiences of these children vary considerably and not all irregular migrant children will experience severe poverty and homelessness as described in this report. However, since immigration status determines access to the labour market and institutional support, it does mean that most children without a regular immigration status will have very limited access to support and vital services like housing, education and health care. Their immigration status will mean that their parents are unable to earn income through employment or other legitimate means and that they will be unable to access benefits.

Given these estimates, in contrast to the relatively few children and young people receiving asylum support and help from local authorities as illustrated above, it appears that many thousands of children may be living without access to any mainstream support and without any formal means of obtaining an income.

The Children’s Society’s experience

During the last few years, our services have supported a growing number of children, young people and families who are made destitute through the asylum and immigration process. This includes young asylum seekers and refugees as well as other young migrants from non-EU and EU countries.

Young refugees homeless in London

Our practitioners working with young refugees across the London boroughs have seen a sharp rise in the number of young people who are experiencing destitution. The majority of these came to the UK alone to seek protection from violence, abuse and persecution, while some were brought here as victims of exploitation and human trafficking. In 2009–10, 25 out of the 174 young refugees (or 14%) that accessed our New Londoners services were destitute. In 2010–11, this figure rose to 17% when 48 out of 189 young clients were destitute. Between April and September 2011, this proportion had doubled to 34% meaning that 46 out of 133 young clients supported by our services were destitute.

These young people typically experienced destitution for three reasons. In some cases social services did not believe they were children and refused to support them. Other clients became homeless when they experienced relationship breakdown and could no longer stay at home or in their private fostering arrangements. A third group experienced destitution because they were discharged from children’s services after turning 18, having been refused asylum and having exhausted their rights to appeal their immigration decisions.
A growing concern in the West Midlands

In response to the growing number of destitute children and families found living in squalor or struggling to survive on the streets, The Children’s Society opened a project in October 2008 designed to support families who are destitute in the West Midlands. These families, including often very young children and babies, lack the basic essentials, such as food, housing, clothing and nappies they need to survive.

Since 2008, the West Midlands centre has been approached by hundreds of children and families, particularly single and pregnant mothers, who have become destitute. These children have no means of survival because their parents are not allowed to work or claim benefits and have been unable to get the help they need from the government or local authorities. Many families have experienced domestic violence and family breakdown, which results in periods of destitution. Some have particularly complex immigration histories. In fact, many of the children we see will have spent their formative years in this country and so the UK is the only ‘home’ they know.
Chapter 3: Why do children, young people and families become destitute?

Young people and families become destitute because, as we have shown, immigration policies purposefully restrict access to benefits, services and the labour market, which prevents families from being able to pull themselves out of poverty. This chapter sets out the key factors and transition points which make children and young people particularly vulnerable to destitution.

Unable to return but unable to access sufficient support

Most destitute children, young people and families supported by our services are seeking protection in the UK from countries with well-documented human rights abuses, endemic violence or which are in a state of chaos, such as Afghanistan, Iraq, Iran, Somalia, Democratic Republic of Congo, Sri Lanka and Eritrea. So despite surviving mass killings or being recruited as child soldiers, the majority are still not granted refugee status or humanitarian protection. Instead they are refused protection even when they face very legitimate barriers to return and are left living in limbo.32

Children and families in this situation may sometimes be able to access very limited ‘hard case’ support under Section 4, provided by the UKBA. This consists of hostel accommodation, which is often inappropriate and unsafe for babies and children, and support through the Azure payment card (see box). In a recent high court case33 the government highlighted the inadequacy of Section 4 support for children in comparison to Section 17 support for children in need:

‘[the Secretary of State] accurately describes Section 4 as providing “an austere regime, effectively of last resort, which is made available to failed asylum seekers to provide a minimum level of humanitarian support.’

Clearly this type of support, as argued by the Home Office itself, is not intended to meet the welfare needs of children.

It is particularly concerning therefore that hundreds of children are living in these circumstances for several years during the early years of their life, which are critical to their development and future life chances.

Azure card

The Azure card replaced the voucher system in 2009 as a payment card limited to a few supermarkets. The card is topped up weekly and cannot be exchanged for cash or public transportation. Only £5 can be carried over to the next week. Without access to cash, families cannot pay for travel to see their legal advisers, or attend essential health appointments. They are often unable to buy enough food to meet their or their children’s needs, leaving many to experience hunger and malnutrition as a direct result. Many have experienced problems in using the card or have had it refused, which causes them anxiety and shame.34
Delays in processing applications and gaps in support provision
Our clients often experience periods of destitution in key transitions within the immigration process and when transferring between different sources of support. This is due to delays in processing their applications for support as well as the policies for how support is provided. The Second Destitution Tally found that 13% of visits to services of the Asylum Support Partnership by destitute people were made by those with dependent children (250 of 1,972 in the course of one month). Half of these were visits by destitute asylum seekers whose claim had been refused and who had exhausted their appeal rights, and had either not applied for Section 4 support or were waiting for it. The rest were asylum seekers who had not received a decision on their asylum claim and/or asylum support or had been granted refugee status but who had not received benefits or found work.

No access to the labour market
Asylum seekers and those who have been refused asylum are not permitted to work. The Home Office is technically able to grant permission to work if an applicant has not had an initial decision within 12 months of their asylum claim, providing the applicant was not responsible for the delay. In reality, only a tiny number of people have successfully applied for permission.

Roger – an unaccompanied young person from Eritrea
Roger came to the UK alone when he was 17. He fled after being imprisoned and tortured in Eritrea. He was refused asylum and the local authority refused to support him as they believed him to be an adult. He has therefore been destitute since he arrived in the UK. Fortunately Roger’s aunt had come to the UK as an unaccompanied minor herself so he was not forced to live on the streets. But he has been sleeping on his aunt’s floor for three years. She is unable to provide him with any financial support and he has no other source of income.

With advocacy and support from The Children’s Society, he was able to get a college place and he has been attending regularly. The Children’s Society pays for his college costs and £30 per week in support for transportation and food. He also receives emotional support and regular free social activities and is involved in volunteering.

Roger tried to access a GP in 2009 for a rash on his arm but the staff refused to register him. He also needed to access a dentist.

‘I grind my teeth. When I’m hungry, angry or when I get stressed.’

Roger struggles to keep his situation hidden from his friends at college.

‘When people ask you what are you doing, where are you working, where are you staying, I don’t have a life. I can’t tell my friends. When I’m at college I’m ok. But I can’t go home. So I go home with friends to their house. Or I just walk around. Sometimes I stay in the street all night. But I don’t sleep there. I don’t feel safe if I’m out on the street. There’s lots of drunk people.’
No support for children whose age is disputed

Some children become destitute because their age is disputed and local authorities are unwilling to provide them with support or accommodation. In the last five years, on average 1,200 asylum applications per year were made by children whose age was disputed by the Home Office. When this happens, solicitors may advise children not to apply for asylum support from the UKBA in case this is taken as admittance that the young person is an adult. Asylum accommodation for single adults is entirely inappropriate for children and poses serious child protection concerns but with no alternatives, the child becomes homeless.

An example of the catastrophic impact on a child following an inaccurate age assessment was highlighted in 2010 in Liverpool by the Local Government Ombudsman, where poor practice left an unaccompanied 15 year old child seeking asylum from Cameroon without care for 15 months when she was wrongly believed to be over 18. She was later re-assessed by a different local authority who found her to be the age she claimed, and this was shown to be accurate from documents later obtained from her country. However, by this time and without the supervision of children’s services, she had been exposed to sexual abuse and had become pregnant.

Withdrawal of support to young people leaving care

Many young asylum seekers that The Children’s Society has supported have become destitute when they turn 18 and come to the end of the asylum process. These are typically young people who came to the UK as unaccompanied asylum-seeking children. The R (SO) v Barking & Dagenham judgment in 2010 held that local authorities have a general duty to provide a former relevant child with accommodation to the extent that his or her welfare requires it, and cannot rely on the provision of accommodation and support from the UKBA. This means that local authorities have an obligation to continue providing accommodation and support to care leavers who are asylum seekers or failed asylum seekers until the age of 21 (or 24 if the young person is pursuing a programme of education or training).

However, there are significant differences in the approach being taken by local authorities in supporting care leavers who have come to the end of the asylum process. Some local authorities appear to be providing support to care leavers regardless of immigration status while others do not. Several young people we have worked with have had their support terminated and have been made homeless as a result of immigration restrictions on support, without any consideration being given to their rights, safety or health.
Peter – a young person from Iran

Peter is a young Kurd who came to the UK alone from Iran to seek protection. But the Home Office rejected his asylum claim before his 18th birthday and six months later social services stopped his support and told him to go back to his country. They called the police, who went to his house and broke down the door while he wasn’t at home. They called him to come to the police station. He was told that he couldn’t go back to his house. He was made homeless for nine months.

During this time he slept on buses, stayed with friends and sometimes in a mosque. He wasn’t able to eat every day. Sometimes he ate only once, sometimes he did not eat at all. He still fasted during Ramadan.

He stayed in unsafe places and regularly experienced violence and abuse on the streets from passers-by. He did not know where else to turn and he tried to commit suicide more than once.

‘I don’t feel that I’m a proper person. We are different. I don’t know how to say it. I don’t think I’m like you because I’ve been homeless.’

‘I tried to kill myself. I took some tablets. I went to sleep but then my friend helped me and gave me food.’

When he was homeless he had a headache every day and was coughing a lot. He still has headaches now but not as often.

The support from voluntary and community organisations was essential in enabling him to survive both in terms of providing him with food, money for travel as well as emotional support.

While he was homeless he wrote poems and was able to sell them to make a little money.

‘I took things out of my heart and put it on paper.’
Victims of exploitation and trafficking

Some migrant children are trafficked into the country or are sent here on visas to live with relatives in private fostering arrangements. Although exact numbers are unknown, it is estimated that there are around 4,000 non-British children in the UK in private fostering placements.\textsuperscript{40} Although many private fostering arrangements will provide children with the care they need, our services have supported many children in private fostering arrangements who have been harmed, exploited or abused for domestic servitude, labour exploitation, benefit fraud and sexual exploitation.\textsuperscript{41} These migrant children experience destitution if they are made homeless or if they manage to escape from their captors. However, due to their immigration status and lack of documentation, they are often refused support from local authorities.

Domestic violence and family break-down

Increasingly The Children’s Society is supporting children and families who came to the UK on a visa, often from Commonwealth countries like Jamaica, India or Pakistan or were born in the UK to parents who came here on a visa but have overstayed and their immigration status has never been regularised. Many of our clients in need of support are lone mothers with children who experience domestic violence or family breakdown. Our services find that mothers are often reluctant to leave abusive relationships because having no recourse to public funds they are dependent on their partners financially and because often their immigration claim is in their partner’s name.

‘Even when they are staying with their partners, the fathers of their children, they are still abusing them. They say “you know I have to be with this guy, if I don’t no-one else is going to support me”.’

Practitioner supporting destitute families

However this leaves mothers and children at risk of serious harm and abuse, which then has repercussions elsewhere. One practitioner recounted a case in which the mother was raped by her partner in front of her children. This incident was uncovered when one of the children began behaving inappropriately towards a peer in school and an assessment was conducted by children’s social care.

‘The mothers are unbelievable in how they try to safeguard their children but sometimes it is out of their grasp.’

Practitioner supporting destitute families

Unwillingness to support young migrants due to financial pressures

The Children’s Society’s support workers experience great difficulties in making referrals to local authorities for migrant children and young people who are destitute. This has become particularly challenging in the last year due to financial pressures on local authorities. Our services are concerned that some local authorities are aware of the difficulties facing destitute young people and families but do not take appropriate action to safeguard them. Social workers openly acknowledge to us that there is a need to support children and families who are destitute but that they do not have the resources to do so. Therefore, our advocacy work often necessitates the involvement of solicitors and the threat of legal action.

Our practitioners have found that appropriate assessments are not always being carried out before a decision is taken to withhold or withdraw support, and the quality of assessments vary considerably between local areas. Some young people and families who are destitute are being refused support or advised to apply for asylum support for which they are not eligible. A number of parents who we have worked with have been threatened that their children will be taken into care. Although these proceedings are rarely acted upon, it means that parents are reluctant to trust and seek further support from authorities, relying instead on riskier survival strategies.
Chapter 4: What happens when children and young people are destitute?

‘There’s only so long you can sleep on someone’s floor before they tell you to move on. Some of the young people we are supporting are sleeping rough.’

Practitioner supporting young asylum-seekers

The experiences of living in such extreme poverty and being homeless can have a serious and lasting impact on children’s physical and psychological health. For this report we consulted with front line practitioners as well as with young people and families who had been supported by our programmes across England to identify the key impacts that destitution has on their lives. This revealed that children, young people and families who are destitute are surviving in appalling conditions and are made vulnerable to exploitation because they do not have adequate support, access to basic essentials and a safe place to live. They have to rely on friends for food and a place to stay, and move around constantly. The young people we spoke to were sometimes forced to sleep rough, on buses, in libraries or on park benches. They were often unable to access health services and education, putting their lives and their future at risk.

Going missing

In many cases young people and families are forced into destitution because statutory agencies deliberately withhold or withdraw support from them due to their immigration status. However, we are extremely concerned that young people turning 18, who have come to the UK as unaccompanied asylum seeking children, are increasingly going missing from care and breaking ties with support providers because they fear being forcibly removed from the UK back to a country where they experienced violence, abuse and torture. Although exact figures are unknown, there is a sense among front line agencies, including some local authorities, that many of these young people are not accessing any services and are very vulnerable to further exploitation, violence and abuse on the streets.

Survival strategies

Although young people do not like to speak about it, our services are aware that some are forced to work informally in order to survive, whether it is to obtain a small amount of cash for food or in return for accommodation from their friends or from strangers they meet on the streets. This leaves young people and families open to exploitation and abuse. Destitute young people tell us that they work long hours - sometimes 14 hours per day for less than £1.50 per hour. The vast majority of examples of informal working among destitute asylum seekers involve unskilled manual labour, low pay, long hours (or multiple jobs), poor working conditions and a constant fear of being raided by immigration officials.

Transactional and commercial sex work are also survival strategies used by some destitute people. This includes engaging in sexual relations with acquaintances or people they meet on the street in exchange for a place to stay, for food or comfort, as well as selling sex in order to earn money. Again although they do not like to speak about it, our services are aware that some young people we support have used these
strategies to survive while they were destitute, exposing themselves to enormous physical and psychological risk.

‘This is how she had to survive. She was staying with men and they were using and abusing her. It was horrendous what was going on. I’m sure there’s a lot of young women in this situation.’

Practitioner supporting destitute families

Claire – a lone mother from Jamaica with two young children

Claire was referred to The Children’s Society because she was homeless and destitute, and was pregnant at the time. She is a Jamaican national who was sent to the UK as a child when she was 12 years old to stay with her older sister following the death of her father. She came to the UK on a visa. But she was kicked out of home at 14 and began prostituting herself in order to survive. She was abused by older men but stayed with them because she had no place to go. She then became pregnant.

When she came to The Children’s Society she did not know her immigration status. With support from a partner organisation she received immigration advice to put in an application for leave to remain in the UK. She also received legal aid to challenge the decision of the Home Office and social services not to provide accommodation to her. As a result of receiving free legal advice, the Home Office agreed to support her while they considered her case, and she has now been granted leave to remain.

‘I wish I could’ve stayed in Jamaica. Maybe I would’ve survived. But I’m so much older now. I can’t go back. How would I survive with my children?’

The young people we spoke to as part of this consultation had never previously been involved in crime. However without any money or any legitimate way of obtaining it, some were forced to beg or steal in order to survive. One young person became very distressed when he spoke about stealing:

‘I didn’t want to do it but I had to do it. I met this older man at the market and he told me how to steal. It was during the winter and I didn’t have any money. He said I had to pay him to stay in his house.’

Young person supported by our services

Health and access to healthcare

Our services find that young people and families who are destitute experience significant health problems. They reported frequent coughs and chest infections, headaches, exhaustion, and were unable to eat properly even when food was available.

Children and families also found it difficult to access healthcare when they needed it while they were destitute. Despite being entitled to free primary healthcare, some were unable to register with a GP. Others feared coming to the attention of authorities and so avoided contact with any statutory agencies.

Recent reports have illustrated how those who are destitute have been denied health care or have incurred thousands of pounds in hospital charges which they cannot pay.43 This leads some to avoid accessing health services altogether. Oxfam highlighted a case involving a mother who had given birth in the home without any health professionals present, placing herself and her newborn in considerable danger.44

This is particularly concerning since in addition to material and social deprivation, many of the other risk factors for infant mortality45 are experienced by migrant women and families, including difficulties accessing antenatal services, low educational level, female genital mutilation and consanguineous marriage.46

Limiting access to healthcare for some groups of migrants also has serious implications for public health.
A recent report by the EU Agency for Fundamental Rights noted that:

‘If certain categories of persons living in a country are excluded from healthcare for reasons of costs or other concerns, such as the wish to avoid detection, this also raises a public health issue. Furthermore, if access to primary or preventive healthcare services is excluded or limited, this is likely to increase costs for emergency healthcare.’

Due to higher risks of certain diseases such as HIV/AIDS, TB, or hepatitis among the migrant population in general, the agency urges states to consider ‘opening health prevention programmes to migrants in an irregular situation’ in order to reduce the health risks for the general population.

**Poor diet and hygiene**

Our services are increasingly concerned about the potential detrimental impact that sustained periods of deprivation have on children’s growth and development. The families and young people we spoke to did not have regular meals. Sometimes they would only eat once a day or not at all. Often parents deny themselves food so that their children can eat.

‘A lot of the time mothers won’t eat just so that their children eat... They don’t have money for buses so they walk for miles to go get food from a church or somewhere. It’s all about survival. I can’t comprehend how people can survive.’

**Practitioner supporting destitute families**

The little money they did have was spent on obtaining cheap food that was high in calorie-content but low in nutritional value. This is because families who are destitute are unable to afford fresh fruit and vegetables. Although direct causal links cannot be made, practitioners gave examples of families they had worked with where children experienced serious health issues which appeared to be linked to their malnutrition.

‘I supported a family once where a 6 year old boy had such poor dental hygiene that he had to have 12 of his milk teeth extracted.’

**Practitioner supporting migrant families**

Our services have also found that living in poor quality accommodation, including hostel accommodation under Section 4 can mean that children have difficulty accessing basic washing or toilet facilities, and as a result personal hygiene deteriorates. Our services have also found that destitute families are often unable to pay for clean underwear, sanitary towels, nappies, laundry services or other essentials. Single mothers relying on Section 4 support and hostel accommodation find it extremely difficult to care for their young children in these conditions.

**Mental health, self harm and suicide**

A number of the young people we spoke to said they were depressed and felt a deep sense of hopelessness. One young person said:

‘I didn’t feel human. I tried to kill myself.’

It was particularly striking that several of the young people we spoke to had self-harmed or attempted suicide while they were destitute.

Refugee children generally suffer high levels of mental health problems. This is not surprising given that they have experienced traumatic events, such as witnessing the murder of relatives, the destruction of their homes and suffered dangerous journeys over long distances. Often their experience in the UK compounds their mental health problems. The Royal College of Psychiatrists has observed that:

‘the psychological health of refugees and asylum seekers currently worsens on contact with the UK asylum system.’
Our services have also found that many parents who had experienced destitution were reported to be on anti-depressants. Practitioners were particularly concerned about how parental depression affected their children, particularly babies and infants. This was graphically illustrated in a recent Serious Case Review of the death of Child ‘J’ by the City and Hackney Safeguarding Children Board. It found that the continuous denial of support on the basis of the mother’s immigration status put the mother under such great stress that it eventually led her to take her own and her baby’s life. According to the review, there was a:

‘fundamental perversity’ in the mother’s situation in that ‘as her need for state support became greater, because she was pregnant and then had a baby to look after, financial assistance was increasingly withdrawn.’

Our services are often concerned by the approach taken by some statutory agencies, which can appear to be more concerned about immigration status than children’s welfare.

‘There’s a child who we’ve worked with who was sleeping on the floor because they didn’t have a bed. And the local authority knew about this but they don’t consider it a safeguarding issue.’

Practitioner supporting destitute families.

Unsafe accommodation, homelessness and abuse

Young people told us that they were worried about being attacked or mugged when they were street homeless. A number of them had experienced verbal and physical abuse from passers by almost every night while they were on the streets, while others were at risk of exploitation by adults. One young person experienced abusive treatment from police officers.

According to our practitioners, some local authorities do not seem to acknowledge the potential risks posed to children and young people who are destitute and are staying in unsafe accommodation. Many children and lone mothers fleeing domestic violence are unable to find shelter and support, and are
Matthew – a young person from Iran

Matthew is a torture survivor who came to the UK from Iran when he was aged 17. He was refused asylum and wanted to appeal but his solicitor did not want to support his appeal so he went to court unrepresented. His appeal was rejected and children’s services stopped his support. He was made homeless for one year. He was seeing a psychologist while being supported by children’s services but once the support was cut off, the counselling stopped as well.

“They said “it’s ok you don’t need any support”. That made me feel horrible. When you don’t have money you can’t manage yourself. I hate asking people for money. To survive I took food from the bins in the back of restaurants. I didn’t often go to charities to get food because I didn’t have money for travel.’

While homeless Matthew’s health deteriorated. He couldn’t sleep at night. His hair was falling out. He experienced a lot of violence when he was sleeping on the streets. Sometimes he was able to work for his friend in exchange for accommodation.

‘People my age, they spend nice time with other people, they go to parties, they have a good weekend. My situation is different.’

He was desperate to stay in the UK because he feared for his life if he were to return to Iran. The Children’s Society provided him with advice and advocacy in accessing support and legal representation. He was able to get a new solicitor and put in a fresh claim. Matthew appears to cope better now. He keeps himself busy, has friends and a strong support network.

‘When people help you, it helps to numb your pain.’

often denied support by local authorities when they have nowhere else to go. Despite the presence of the Home Office funded Sojourner project,52 which seeks to support those with no recourse to public funds who experience domestic violence, our services continue to see a significant number of families in this situation.

Denial of hope and future prospects

The experience of destitution is often described as being about the denial of any hope for the future or possibility of rebuilding a life, and about a lack of freedom to make decisions to improve one’s life.53 For some young people supported by our services, being engaged in education despite being destitute provided them with a great deal of support and a sense of normality which allowed them to progress in their lives and cope with their situation. For others however, the frequent movement, lack of adequate rest and anxiety about their situation meant that they were unable to concentrate and learn effectively. Some of the young people we spoke to were excluded from college altogether because of their situation.

Although there is no specific research on the long-term impact of destitution on children and young people within this context, the impact of homelessness, poverty and mental-health54 on children is well documented within other contexts. For example, a recent report by the homelessness charity Crisis stated that on average, homeless people die 30 years younger than the general population in the UK.55 This highlights the very serious dangers and disadvantages faced by those who are homeless and without support both in the short-run and in the long-run.
Chapter 5: Conclusion and recommendations

‘No-one believes what he says but he’s got an incredible character that hasn’t been broken by his experience of being destitute, despite having suffered so much loss.’ Practitioner about a young person

Asylum-seeking and migrant children are living in conditions of extreme poverty for extended periods of time, often years. This has a significant impact on their immediate health and well-being as well as their sense of self-worth, dignity and hope for the future. According to the young people, families and support workers we spoke to for this report, children are going hungry, lacking adequate clothing, medicine and other essential goods and putting their lives at risk by sleeping rough or with strangers.

During periods of destitution young people and families are exposed to exploitation, violence and abuse, particularly those who are homeless and on the streets. While destitute, some young people we spoke to self-harmed and attempted suicide, while others were sexually exploited or engaged in other harmful activities in order to survive. It is clear that statutory safeguarding duties are not being upheld, neither by the UK Border Agency nor by local agencies.

Despite a lack of official data, the evidence gathered by The Children’s Society demonstrates incontrovertibly that the experiences of young people who are destitute have a profound impact on them in the short-term and could have significant implications for their future.

What is also clear is that in many cases children and young people are deliberately being made destitute by the government’s policy of excluding these young asylum-seekers and migrants from support. For those young people and families whose claims have been refused but who are unable to return home, this policy is pushing them into alarming levels of deprivation. It must be recognised that this policy has failed and continues to fail, and that urgent steps must now be taken to ensure that children and families are not left to starve on our streets.

Recommendations

Children and young people have specific rights that should be protected above considerations of immigration control, and should be central to the decisions made about them.

End-to-end cash-based support

The government should implement a single end-to-end cash-based support system for asylum seekers as well as those who have been refused asylum to ensure that no child has to survive below an acceptable level. This support should be at 100% of income support for children under 18 and at least 70% for adults where accommodation is provided. Support should be adjusted annually in line with mainstream benefits.

Local authority support

Leaving care provisions should be available to all looked-after children regardless of their immigration status and they should be supported until at least the age of 21 (or until 24 if they are in education). This could be achieved by amending Schedule 3 of the Nationality, Immigration and Asylum Act 2002 to ensure that leaving care and children in need provisions are always made available to children and young people to meet their welfare needs. This should include support provided to children in need and their families under Section 17 of the Children Act 1989.
Permission to work

Permission to work should be granted to asylum seeking parents and young adults if their claim for asylum has not been concluded within six months through no fault of their own in order to help ensure that children are not growing up in destitution. Refused asylum seekers who temporarily cannot be returned to their country of origin through no fault of their own should be allowed to work.

Legal advice

Children and vulnerable young people should be able to access legal aid for advice and representation in relation to their civil cases including their immigration claims to ensure that they have a fair chance to have their cases considered. The provision of early legal advice, which was first piloted in Solihull in 2006-2007, should be rolled out nationally and made available to all children, young people and families who need it.

Monitoring destitution

To be reflective of the true extent of poverty, child poverty statistics should capture the numbers of all asylum-seeking and migrant children living in poverty, including those who experience destitution, to ensure that effective policies are developed to tackle this issue. This could be done through independent national surveys or by adapting and analysing existing data sets.

Child poverty strategy

As part of the child poverty strategy, including its progress reports and corresponding local needs assessments, both central and local government should consider children and young people from asylum-seeking, refugee and migrant communities in order to ensure that eradicating child poverty is achieved for all children regardless of immigration status. The Home Office should be made accountable for the number of children living in poverty as a consequence of immigration policy.

Building resilience among young people

Central and local government should explore strategies to build children and young people’s resilience through participation and empowerment work by involving young refugees and migrants in projects that celebrate their stories of overcoming adversity. Young refugees and migrants should be involved in local and national decision-making like other children, for example through the Department for Education’s consultations with children in care and young carers and through local children in care councils, in order to capture their unique and innovative perspective.

Conclusion

In his preface to the Asylum Matters report by the Centre for Social Justice56 which sets out a series of policy recommendations on restoring trust in the UK asylum system, the now Secretary of State for Work and Pensions, Iain Duncan Smith MP referred to the policy of forced destitution and illegal working by asylum seekers as a ‘black hole’ and heavily criticised the previous government for this ‘failed policy’:

‘UK policy is still driven by the thesis, clearly falsified, that we can encourage people to leave by being nasty.’

The experiences of children and young people presented in this report raise serious child protection concerns. The risks facing these children when they are destitute are acute and need to be addressed urgently by local and central government agencies. In order to ensure compliance with its safeguarding duties and its obligations under the UN Convention on the Rights of the Child, the government should urgently review all immigration policies and legislation that force children, young people and families into destitution, and ensure that support is provided to all children and young people who need it, regardless of their immigration status.
Notes


4. Some extra payments are available for pregnant women and very young children. For more information see: www.asapproject.org/web/images/PDFs/Factsheets_2011/11.pdf

5. The requirements are set out in the Immigration and Asylum (Provision of Accommodation to Failed Asylum-Seekers) Regulations 2005. For more information see: www.ukba.homeoffice.gov.uk/asylum/support/apply/section4/


8. Sub-section 17(3,6), Children Act 1989

9. This includes support provided under Sections 21 and 29 of the National Assistance Act 1948 (accommodation and welfare), and Sections 17, 23C, 24A and 24B of the Children Act 1989 (welfare, accommodation and leaving care provisions).

10. A child born in the UK with a British or settled parent may be a British citizen herself. However, this information if often overlooked because immigration claims are in the parent’s name.


12. Article 3 of the UN Convention on the Rights of the Child (UNCRC) states that: ‘in all actions concerning children, whether undertaken by public or private social welfare institutions, courts of law, administrative authorities or legislative bodies, the best interests of the child shall be a primary consideration.’


14. Article 2 of the UNCRC obligates all states to protect the rights set out in the convention to ‘each child within their jurisdiction without discrimination of any kind irrespective of the child’s or his or her parent’s or legal guardian’s race, colour, sex, language, religion, political or other opinion, national, ethnic or social origin, property, disability, birth or other status.’


16. Section II of the Children Act 2004


18. The Education Act 1996 places a legal duty on local authorities to ‘secure that appropriate education is available to all children of compulsory school age (5-16) in their areas’. This will increase to 17 by 2015 and 18 by 2015. No reference is made to the residence status of child, so undocumented children are implicitly included. The UKBA does specify that the local authority must ensure that all children living in its area receive full-time education, regardless of their immigration status.

19. Undocumented migrant children and families including those who have been refused asylum should have access to free primary care, emergency care, family planning, treatment of communicable diseases (excluding HIV) and in serious mental health cases. However they are liable to pay the full costs for any other hospital treatment or diagnosis. Refused asylum seekers on section 95 or section 4 and all unaccompanied children will be exempt from these charges nevertheless confusion among frontline staff and recipients on entitlements to healthcare lead to problems in accessing healthcare. The Department of Health regulations can be found here: www.dh.gov.uk/prod_consum_dh/groups/dh_publications/documents/digitalasset/dh_128970.pdf

20. Local authorities have an obligation to provide support including accommodation to avoid a breach of human rights. Section 20 of the Children Act 1998 requires local authorities to ‘provide accommodation for any child in need within their area’, but this only explicitly imposes the duty to house the child. Under Section 17 of the same Act local authorities have a duty to provide services to a child in need and their carer which may include accommodation.


22. Relative low income, combined low income and material deprivation, absolute low income and persistent poverty.


24 ‘I don’t feel human’: Experiences of destitution among young refugees and migrants


28. Data extracted from Table D1 referring to unaccompanied asylum seeking children, who ceased to be looked after during the years ending 31 March 2007 to 2011, and the reasons, provided by the Department for Education: www.education.gov.uk/servlets/DB/SFR/001026/index.shtml


38. Former relevant children or care leavers who were accommodated or looked after by social services under section 20 of the Children Act 1989 for 13 weeks or more while still under 18, and to whom the local authority social services department now owes a range of leaving care duties. Leaving care duties are owed until the young person turns 21 and some of the duties may continue up to a maximum age of 24 if the young person continues to pursue a programme of education set out in his or her pathway plan.


46. Marriage between persons related by blood or descended from a common ancestor.


50. The mother in this case was an EU national and was generally permitted to work and claim mainstream benefits. However due to an error in judgement relating to the mother’s immigration status and length of residence in the UK, she was wrongly denied support that (it was revealed after her death) she had been entitled to.


53. For more information see: www.eaves4women.co.uk/Sojourner/Sojourner.php


The Children’s Society

The Children’s Society wants to create a world where all children and young people are respected, valued and heard. We believe that childhood should be happy and that young people deserve to reach their full potential.

That’s why we work hard to transform the lives of over 48,000 children and young people in England each year.

Our priority is children who have nowhere else to turn. We protect young runaways from the dangers of life on the street. We give disabled children a voice and more control over their lives. Our work helps young refugees start afresh in new communities, and gives young carers time and energy to enjoy their childhood.

With over 75 programmes and children’s centres throughout England, we offer care, respite, legal support and mentoring schemes that help turn lives around.

Through our campaigns and research, we seek to influence policy and perceptions at all levels so young people have a better chance in life.

To find out more about what we do visit www.childrenssociety.org.uk